

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known)

Chapter 11

FILED

☐ Check if this an amended

FILED JUL 27 P 2: 36

DOUGLAS E. WEDGE, CLERK
U.S. BANKRUPTCY COURT
WESTERN DISTRICT OF OK
DEPUTY 04/22

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Heritage Funeral Home & Cremation Service</u>	
<hr/>		
2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names	<u>Heritage Funeral Hom Services, LLC</u>	
<hr/>		
3. Debtor's federal Employer Identification Number (EIN)	<u>27-0496230</u>	
<hr/>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>1300 N Lottie Ave</u> <u>Oklahoma City, OK 73117-2000</u> Number, Street, City, State & ZIP Code	<u>1300 N Lottie Ave</u> <u>Oklahoma City, OK 73117-2000</u> P.O. Box, Number, Street, City, State & ZIP Code
	<u>Oklahoma</u> County	Location of principal assets, if different from principal place of business <u>1300 N Lottie Ave Oklahoma City, OK 73117-2000</u> Number, Street, City, State & ZIP Code
<hr/>		
5. Debtor's website (URL)	<hr/>	
<hr/>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: <hr/>	
<hr/>		

Debtor **Heritage Funeral Home & Cremation Service** Case number (if known) _____
 Name

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. Check all that apply:

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 04/01/25 and every 3 years after that).
☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
CJK ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D) and it chooses to proceed under Subchapter V of Chapter 11.
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor Heritage Funeral Home & Cremation Service
Name

Case number (if known) _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District _____ When _____ Case number, if known _____

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

- ☐ It needs to be physically secured or protected from the weather.

- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

- ☐ Other _____

Where is the property?

Number, Street, City, State & ZIP Code _____

Is the property insured?

☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

- ☒ 1-49
☐ 50-99
☐ 100-199
☐ 200-999

- ☐ 1,000-5,000
☐ 5001-10,000
☐ 10,001-25,000

- ☐ 25,001-50,000
☐ 50,001-100,000
☐ More than 100,000

15. Estimated Assets

- ☒ \$0 - \$50,000
☐ \$50,001 - \$100,000
☐ \$100,001 - \$500,000
☐ \$500,001 - \$1 million

- ☐ \$1,000,001 - \$10 million
☐ \$10,000,001 - \$50 million
☐ \$50,000,001 - \$100 million
☐ \$100,000,001 - \$500 million

- ☐ \$500,000,001 - \$1 billion
☐ \$1,000,000,001 - \$10 billion
☐ \$10,000,000,001 - \$50 billion
☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$1,000,001 - \$10 million

☐ \$500,000,001 - \$1 billion

Debtor	Heritage Funeral Home & Cremation Servic	Case number (if known)
	<small>Name</small>	
	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million
	<input checked="" type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million
	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million
		<input type="checkbox"/> \$1,000,000,001 - \$10 billion
		<input type="checkbox"/> \$10,000,000,001 - \$50 billion
		<input type="checkbox"/> More than \$50 billion

Debtor Heritage Funeral Home & Cremation Service Case number (if known) _____
 Name

Request for Relief, Declaration, and Signatures

WARNING — Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 1, 2022 7/27/23
 MM / DD / YYYY

X /s/ Christopher J. Harrison, Sr.
 Signature of authorized representative of debtor

Christopher J. Harrison, Sr.
 Printed name

Title Managing Partner

405 424-5100

18. Signature of attorney

X /s/ Christopher Woods
 Signature of attorney for debtor

Date June 1, 2022
 MM / DD / YYYY

Christopher Woods, Esq.
 Printed name

Christopher J. Woods & Associates, P.C.
 Firm name

1200 N. Eastman Ave.
Enterprise, AL 36034
 Number, Street, City, State & ZIP Code

Contact phone 334-363-5555 Email address cawlaw@hotmail.com

Alabama
 Bar number and State

Fill in this information to identify the case:

Debtor name Heritage Funeral Home & Cremation ServicUnited States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets1. *Schedule A/B: Assets-Real and Personal Property* (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B* \$ 0.001b. **Total personal property:**Copy line 91A from *Schedule A/B* \$ 37,300.001c. **Total of all property:**Copy line 92 from *Schedule A/B* \$ 37,300.00**Part 2: Summary of Liabilities**2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)Copy the total dollar amount listed in Column A Amount of claim, from line 3 of *Schedule D* \$ 0.003. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)3a. **Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F* \$ 295,167.653b. **Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F* +\$ 48,989.394. **Total liabilities**

Lines 2 + 3a + 3b

\$ 344,157.04

Fill in this information to identify the case:

Debtor name **Heritage Funeral Home & Cremation Serv**United States Bankruptcy Court for the: **WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Midfirst Bank****Operating Checking Account****8414****\$1,200.00**3.2. **First Security Bank and Trust****Savings****9617****\$2,000.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$3,200.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**☒ No. Go to Part 3.☐ Yes Fill in the information below.**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☒ No. Go to Part 4.☐ Yes Fill in the information below.**Part 4: Investments**

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 1

Debtor Heritage Funeral Home & Cremation Servic
Name

Case number (if known) _____

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software			
	<u>2 Laptops</u>	<u>\$600.00</u>		<u>\$600.00</u>
	<u>9 Sets of Church Trucks (Metal platform caskets sit on)</u>	<u>\$2,700.00</u>		<u>\$2,700.00</u>
	<u>2 Duo Tronic Embalming Machines</u>	<u>\$2,400.00</u>		<u>\$2,400.00</u>
	<u>One Porcelain Embalming Table</u>	<u>\$3,500.00</u>		<u>\$3,500.00</u>
	<u>1 Removal Cot</u>	<u>\$150.00</u>		<u>\$150.00</u>
	<u>3 Office Desks</u>	<u>\$1,150.00</u>		<u>\$1,150.00</u>
	<u>1 Conference Table</u>	<u>\$750.00</u>		<u>\$750.00</u>
	<u>2 Love Seats</u>	<u>\$2,500.00</u>		<u>\$2,500.00</u>
	<u>1 Coffee Table</u>	<u>\$500.00</u>		<u>\$500.00</u>
	<u>One Couch Table</u>	<u>\$350.00</u>		<u>\$350.00</u>

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 2

Debtor Heritage Funeral Home & Cremation Service Case number (if known) _____
 Name

<u>6 Conference Room Tables and chairs</u>	<u>\$1,200.00</u>	<u>\$1,200.00</u>
<u>6 Standard Armchairs</u>	<u>\$1,800.00</u>	<u>\$1,800.00</u>
<u>2 Laser Printer Copiers</u>	<u>\$800.00</u>	<u>\$800.00</u>
<u>4 - 32 inch Flat screen TV's</u>	<u>\$1,600.00</u>	<u>\$1,600.00</u>
<u>Misc. Register Books Flag Cases</u>	<u>\$500.00</u>	<u>\$500.00</u>
<u>6 Used 20 Gauge Steel Casket's multiple colors</u>	<u>\$3,600.00</u>	<u>\$3,600.00</u>

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**
 Add lines 39 through 42. Copy the total to line 86.

\$24,100.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2000 Cadillac Title held in Heritage Funeral Holding Company	<u>\$10,000.00</u>		<u>\$10,000.00</u>

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

Debtor Heritage Funeral Home & Cremation Servic
Name

Case number (If known) _____

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$10,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor Heritage Funeral Home & Cremation Service
Name

Case number (if known) _____

Part 12: Summary**In Part 12 copy all of the totals from the earlier parts of the form**
Type of property**Current value of
personal property****Current value of real
property**80. **Cash, cash equivalents, and financial assets.**
Copy line 5, Part 1\$3,200.0081. **Deposits and prepayments.** *Copy line 9, Part 2.*\$0.0082. **Accounts receivable.** *Copy line 12, Part 3.*\$0.0083. **Investments.** *Copy line 17, Part 4.*\$0.0084. **Inventory.** *Copy line 23, Part 5.*\$0.0085. **Farming and fishing-related assets.** *Copy line 33, Part 6.*\$0.0086. **Office furniture, fixtures, and equipment; and collectibles.**
Copy line 43, Part 7.\$24,100.0087. **Machinery, equipment, and vehicles.** *Copy line 51, Part 8.*\$10,000.0088. **Real property.** *Copy line 56, Part 9.....>*\$0.0089. **Intangibles and intellectual property.** *Copy line 66, Part 10.*\$0.0090. **All other assets.** *Copy line 78, Part 11.*+ \$0.0091. **Total.** Add lines 80 through 90 for each column\$37,300.00

+ 91b.

\$0.0092. **Total of all property on Schedule A/B.** Add lines 91a+91b=92\$37,300.00

Fill in this information to identify the case:

Debtor name Heritage Funeral Home & Cremation Servic

United States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name Heritage Funeral Home & Cremation ServicUnited States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with **PRIORITY** Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102 Date or dates debt was incurred 2016 Last 4 digits of account number 9255 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,038.44 \$0.00
2.2	Priority creditor's name and mailing address Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102 Date or dates debt was incurred 2017 Last 4 digits of account number 9255 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,035.44 \$0.00

Debtor	Heritage Funeral Home & Cremation Servic <small>Name</small>	Case number (if known)	
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2.3	Priority creditor's name and mailing address Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,006.76	\$0.00
	Date or dates debt was incurred 2018	Basis for the claim:		
	Last 4 digits of account number 9255 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,082.67	\$0.00
	Date or dates debt was incurred 2019	Basis for the claim:		
	Last 4 digits of account number 9255 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,967.33	\$0.00
	Date or dates debt was incurred 2020	Basis for the claim:		
	Last 4 digits of account number 9255 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,759.35	\$0.00
	Date or dates debt was incurred 2021	Basis for the claim:		
	Last 4 digits of account number 9255 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Heritage Funeral Home & Cremation Servic		Case number (if known)		
	Name				
2.7	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,468.73	\$0.00	
	Date or dates debt was incurred 8-1-2011	Basis for the claim: 8/1/2011 to 2/29/2012 Sales Tax			
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<hr/>					
2.8	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$942.10	\$0.00	
	Date or dates debt was incurred 8-1-2011	Basis for the claim: 8/1/2011 to 2/29/2012 Penalty and Interest			
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<hr/>					
2.9	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$649.80	\$0.00	
	Date or dates debt was incurred 3-1-2012	Basis for the claim: Sales Tax 3/1 to 5/31 of 2012			
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<hr/>					
2.10	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$360.61	\$0.00	
	Date or dates debt was incurred 3-1-2012	Basis for the claim: 3/1 to 5/31 of 2012 Penalty and Interest			
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Heritage Funeral Home & Cremation Servic	Case number (if known)
	<small>Name</small>	

2.11	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,692.60	\$0.00
	Date or dates debt was incurred 01/01/2013	Basis for the claim: 1/1/2013 to 5/31/2013 Sales Tax		
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,056.89	\$0.00
	Date or dates debt was incurred 01/01/2013	Basis for the claim: 1/1/2013 to 5/31/2013 Penalty and Interest		
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$184,854.82	\$0.00
	Date or dates debt was incurred 05/01/2015	Basis for the claim: 5/1/2015 to 5/31/2015 Sales Tax		
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$83,981.90	\$0.00
	Date or dates debt was incurred 05/01/2015	Basis for the claim: 5/1/2015 to 5/31/2015 Penalty and Interest		
	Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Heritage Funeral Home & Cremation Servic		Case number (if known)	
Name			
2.15	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$730.11 \$0.00
Date or dates debt was incurred 06/01/2015		Basis for the claim: 6/1/2015 to 8/31/2016 Sales Tax	
Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.16	Priority creditor's name and mailing address Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$540.10 \$0.00
Date or dates debt was incurred 06/01/2015		Basis for the claim: 6/1/2015 to 8/31/2016 Penalty and Interest	
Last 4 digits of account number 6230 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Green Box Capital 2200 Biscayne Blvd Ste 200 Miami, FL 33137-5016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$27,728.64
3.2	Nonpriority creditor's name and mailing address Oklahoma Mortuary Service 2424 N Oklahoma Ave Oklahoma City, OK 73105-3005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$21,260.75

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

Debtor Heritage Funeral Home & Cremation Servic
Name

Case number (if known) _____

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.5a. \$ 295,167.655b. + \$ 48,989.395c. \$ 344,157.04

Fill in this information to identify the case:

Debtor name Heritage Funeral Home & Cremation ServiceUnited States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Heritage Funeral Home & Cremation ServicUnited States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1	<div>Street</div> <div>City State Zip Code</div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	<div>Street</div> <div>City State Zip Code</div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	<div>Street</div> <div>City State Zip Code</div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	<div>Street</div> <div>City State Zip Code</div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Heritage Funeral Home & Cremation ServcUnited States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 7/27/23 X /s/ Christopher J. Harrison, Sr.

Signature of individual signing on behalf of debtor

Christopher J. Harrison, Sr.

Printed name

Managing Partner

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Heritage Funeral Home & Cremation ServUnited States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA, OKLAHOMA DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that applyGross revenue
(before deductions and exclusions)From the beginning of the fiscal year to filing date:
From 1/01/2022 to Filing Date☒ Operating a business\$163,093.90☐ Other Amount BilledFor prior year:
From 1/01/2021 to 12/31/2021☒ Operating a business\$681,248.65☐ Other Amount Billed

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from
each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer

Check all that apply

3.1. **Axyom Construction**
417 Frisco Ave
Clinton, OK 73601-3439**March 2022****\$12,000.00**
☐ Secured debt
☐ Unsecured loan repayments
☐ Suppliers or vendors
☐ Services
☒ Other Roof Repair

Debtor **Heritage Funeral Home & Cremation Servic**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.2. Ardis Cubit Sercie and Repair 6201 N Post Oak Rd Oklahoma City, OK 73105-6427	May 2022	\$21,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other HVAC Replacement

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Christopher J. Harrison, Sr. 1425 NE 48th St Oklahoma City, OK 73111-5823 Managing Partner	Weekly over one year	\$65,000.00	Average Weekly payment of \$1,250 for running company
4.2. JeKia Harrison 1425 NE 48th St Oklahoma City, OK 73111-5823 Daughter of Managing Partner	June 2021 through July 2021	\$4,000.00	Office Work and Funeral Service

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800	Lockout of business from 1300 N. Lottle	April 19, 2022	\$0.00

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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Debtor **Heritage Funeral Home & Cremation Servic**

Case number (if known)

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. State of Oklahoma, Ex Rel. Oklahoma Tax Commission v. Heritage Funeral Home and Cremation Services, LLC., et al. CJ-2020-3556	Injunction/Restraining Order	Oklahoma County Courthouse 320 Robert S Kerr Ave Oklahoma City, OK 73102-3457	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Christopher A. Ward 1111111111 1111111111 Oklahoma City, OK 73102-3453	4000	1/1/2022 2022	\$1,000.00
Email or website address			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 3

Debtor **Heritage Funeral Home & Cremation Service**

Case number (if known) _____

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☐ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
☒ Yes. State the nature of the information collected and retained.

Full Name; Date of Birth; Social Security Number for deceased and responsible party

Does the debtor have a privacy policy about that information?

- ☐ No
☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

Debtor **Heritage Funeral Home & Cremation Servic**

Case number (if known) _____

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. First Security Bank & Trust 1541 NE 23rd St Oklahoma City, OK 73111-3210	XXXX-7797	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	March 29, 2022	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
Christopher J. Harrison, Sr. 1425 NE 48th St Oklahoma City, OK 73111-5823	1300 N Lottie Ave Oklahoma City, OK 73117-2000	2000 Cadillac Deville Hearse	\$10,000.00
Heritage Funeral Holding Company 1300 N Lottie Ave Oklahoma City, OK 73117-2000	1300 N. Lottie Avenue	Midfirst Bank Account 8414	\$1,200.00
Heritage Funeral Holding 1300 N Lottie Ave Oklahoma City, OK 73117-2000	1300 N Lottie Ave Oklahoma City, OK 73117-2000	First Security Bank and Trust Savings	\$2,000.00

Part 12: Details About Environment Information

Debtor **Heritage Funeral Home & Cremation Servic**

Case number (if known) _____

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN. Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
------------------	----------------------------

26a.1. **Christopher J. Harrison, Sr.**
1425 NE 48th St
Oklahoma City, OK 73111-5823

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Debtor **Heritage Funeral Home & Cremation Servic**

Case number (if known)

Name and address**Date of service
From-To**

26b.1. **First Security Bank & Trust**
1541 NE 23rd St
Oklahoma City, OK 73111-3210

April 2021 PPP loan

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None**Name and address****If any books of account and records are unavailable,
explain why**

26c.1. **Christopher J. Harrison, Sr.**
1425 NE 48th St
Oklahoma City, OK 73111-5823

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None**Name and address**

26d.1. **First Security Bank & Trust**
1541 NE 23rd St
Oklahoma City, OK 73111-3210

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the
inventory****Date of inventory****The dollar amount and basis (cost, market,
or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name**Address****Position and nature of any interest****% of interest, if
any**

Christopher J. Harrison, Sr. **1425 NE 48th St**
Oklahoma City, OK 73111-5823

Managing Member**100**

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.**Name and address of recipient****Amount of money or description and value of
property****Dates****Reason for providing
the value**

Debtor Heritage Funeral Home & Cremation Servic Case number (if known) _____

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Christopher J. Harrison, Sr. 1425 NE 48th St Oklahoma City, OK 73111-5823	Weekly Payment averaging \$1,250.00	Weekly	Operating Business
	Relationship to debtor Managing Member			
30.2	JeKia Harrison 1425 NE 48th St Oklahoma City, OK 73111-5823	\$4,000	June 2021 through July 2021	Office Work and Service
	Relationship to debtor Daughter of Christopher J. Harrison, Managing Partner			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

~~June 1, 2022~~ 7/27/23

/s/ Christopher J. Harrison, Sr.

Christopher J. Harrison, Sr.

Signature of individual signing on behalf of the debtor

Printed name

Position or relationship to debtor

Managing Partner

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207)* attached?

- ☒ No
☐ Yes

United States Bankruptcy Court
Western District of Oklahoma, Oklahoma Division

In re Heritage Funeral Home & Cremation Servic

Debtor(s)

Case No.

Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Christopher J. Harrison, Sr. 1425 NE 48th St Oklahoma City, OK 73111-5823	General Partner	100	

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Managing Partner** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date

~~7/27/2022~~7/27/23

Signature

/s/ Christopher J. Harrison, Sr.Christopher J. Harrison, Sr.

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
 18 U.S.C. §§ 152 and 3571.*

Fill in this information to identify the case:

Debtor name **Heritage Funeral Home & Cremation Service**
 United States Bankruptcy Court for the: **WESTERN DISTRICT OF
 OKLAHOMA, OKLAHOMA
 DIVISION**
 Case number (if known): _____

☐ Check if this is an

amended filing

Official Form 204**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800			Disputed			\$184,854.82
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800			Disputed			\$83,981.90
Green Box Capital 2200 Biscayne Blvd Ste 200 Miami, FL 33137-5016		Bank loan				\$27,728.64
Oklahoma Mortuary Service 2424 N Oklahoma Ave Oklahoma City, OK 73105-3005	(405) 606-6160	Trade debt				\$21,260.75
Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102						\$3,082.67
Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102						\$3,038.44

Debtor **Heritage Funeral Home & Cremation Servic**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102						\$3,035.44
Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102						\$3,006.76
Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102						\$2,967.33
Oklahoma County Treasurer 320 Robert S Kerr 307 Oklahoma City, OK 73102						\$2,759.35
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$2,468.73
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$1,692.60
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$1,056.89
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$942.10
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$730.11

Debtor **Heritage Funeral Home & Cremation Servic**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$649.80
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$540.10
Oklahoma Tax Commission PO Box 26800 Oklahoma City, OK 73126-0800						\$360.61

United States Bankruptcy Court
Western District of Oklahoma, Oklahoma Division

IN RE:

Case No. _____

Heritage Funeral Home & Cremation Service

Chapter 11

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: 7/27/23 Signature: /s/ Christopher J. Harrison, Sr.
Christopher J. Harrison, Sr., Managing Partner Debtor

Date: _____ Signature: _____
Joint Debtor, if any

Green Box Capital
2200 Biscayne Blvd Ste 200
Miami, Florida 33137-5016

Oklahoma County Treasurer
320 Robert S Kerr 307
Oklahoma City, Ok 73102

Oklahoma Tax Commission
PO Box 26800
Oklahoma City , Ok 73126 -0800

**United States Bankruptcy Court
Western District of Oklahoma, Oklahoma Division**

IN RE:
Heritage Funeral Home & Cremation Service
Debtor(s)

Case No. _____
Chapter **11**

CORPORATE OWNERSHIP STATEMENT

Pursuant to Bankruptcy Rules 1007(a) and Bankruptcy Rule 7007.1, and Local Rules 1007-1, 2003-2, 7007.1-1 and 9014-1(B),

Heritage Funeral Home and Cremation Services, L.L.C., a
[Name of Corporate Party]

(check one):

- ☐ Corporate Debtor
- ☐ Party to an adversary proceeding
- ☐ Party to a contested matter
- ☐ Member of committee of creditors

makes the following disclosure(s):

All corporations, other than a governmental unit, that directly or indirectly own ten percent (10%) or more of any class of the corporation's equity interests are listed below:

OR

- ☒ There are no entities that directly or indirectly own 10% or more of any class of the corporation's equity interest.

Dated this 1st day of June 2022

Christina Harewood
~~for Christopher Wood~~
~~Attorney Name: OBA #014-#13036~~
~~[Address/Telephone/Fax/Email]~~
~~Christopher Wood~~
~~1133 N Portland Ave~~
~~Oklahoma City, OK 73107-1543~~
~~Phone: (405) 525-5005 Fax: (405) 521-8567~~
~~caulaw@hotmail.com~~
~~Attorney for Heritage Funeral Home & Cremation Service~~